

CAREER PATHWAYS Intake Checklist

Name:	Date:
Please return application with all items listed	below. Applications without all documents, will not be accepted
Valid Photo ID	
HS DIPLOMA/GED (REQUIRED EX	CEPT STNA PROGRAM)
Social Security Card for self and a	all household members.
Current Hamilton County Local P	olice Report
Proof of Hamilton County Reside the same as the one on photo ID).	nce (Envelope with name printed on it, unless current address is
SNAP LETTER	
Income Verification for the entire (Pay stubs, social security award letter, unem	last 30 days for self and all household members 18 and older. ployment letter, etc.)
Completed Application	
These documents must be submitted bef	ore an applicant can be considered into the Training Program.
Applicant Signature/Date	Staff Signature/Date